PATENT APPLICATION FEE DETERMINATION RECORD

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

Application or Docket Number

			-ttectiv	re Decen	nber 2	9, 1999	•						
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
F	OR		NUMB	ER FILED		NUMBER	EXTRA	RATE	FEE	7	RATE	FEE	
BASIC FEE			c	. , .				· V	345.00	OR		690.00	
TOTAL CLAIMS			Š	7 minus	s 20= *	37		X\$ 9=		OR	X\$18=	666	
INE	DEPENDENT C	LAIMS		3 minu	ıs 3 = :			X39=			X78=	6.	
MULTIPLE DEPENDENT CLAIM PRESENT									 	OR		 	
* If the difference in column 1 is less than zero, enter "0" in column 2								+130=		OR	+260=	176	
CLAIMS AS AMENDED - PART II								TOTAL		OR	TOTAL		
		(Colu	ımn 1)		(Co	olumn 2)	(Column 3)	SMALL	ENTITY	OR	OTHER SMALL		
AMENDMENT A		REM/	NIMS NINING TER DMENT		N PRE	IGHEST UMBER EVIOUSLY AID FQR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.6		Minus	** (57	= '4	X\$ 9=		OR	X\$18=		
	Independent	•	(2	Minus	***		= /	X39=		OR	X78=		
	FIRST PRESE		+130=		OR	+260=							
								TOTAL		اا	TOTAL	· ·	
		(Colu	mn 1)		(Co	olumn 2)	(Column 3)	ADDIT. FEE			ADDIT. FEE		
AMENDMENT B		REMA	AIMS AINING TER DMENT		N PRE	IGHEST UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	**		=	X\$ 9=		OR	X\$18≐		
	Independent	•		Minus	***		=	X39=		OR	X78=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							120		1 1		·	
								+130= TOTAL	<u> </u>	OR	+260=	<u> </u>	
							n .	ADDIT. FEE		OR	ADDIT. FEE		
			mn 1) NMS			olumn 2) IGHEST	(Column 3)		1				
AMENDMENT C		AF	INING TER DMENT		PRE	UMBER EVIOUSLY AID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•		Minus	**		=	X\$ 9= ·		OR	X\$18=		
	Independent	*		Minus	***		=	X39=		OR	X78=		
-	FIRST PRESE	NTATIO	N OF M	ULTIPLE DE	EPENDE	NT CLAIM		+130=		OR	+260=	\ 	
•	If the entry in colu	mn 1 is le	ss than th	ne entry in co	lumn 2, w	vrite "0" in co	lumn 3.	TOTAL			TOTAL	-	

ADDIT. FEE